

**LIMITED LIABILITY COMPANY**

**STATE OF MAINE**

**AMENDED ANNUAL REPORT**

(Maine or Foreign LLC)

\_\_\_\_\_  
Deputy Secretary of State

**A True Copy When Attested By Signature**

\_\_\_\_\_  
Deputy Secretary of State

\_\_\_\_\_  
(Name of Maine or Foreign Limited Liability Company)

Pursuant to [31 MRSA §1666](#), the undersigned limited liability company executes and delivers the following Amended Annual Report:

**FIRST:** The jurisdiction of its organization is \_\_\_\_\_.

**SECOND:** The date the original annual report was filed is \_\_\_\_\_.

**THIRD:** The information that has changed (attach additional pages, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOURTH:** The date this information changed is \_\_\_\_\_.

- An amended annual report may be filed by the limited liability company to change information currently on file. The time for filing an amended annual report is from the date of the original filing until December 31<sup>st</sup> of that filing year.
- If you are changing a contact person, you must provide the name and complete physical address of this individual. Additionally, you must provide the information currently on file and indicate how it changed.

**DATED** \_\_\_\_\_

**\*Authorized Person(s)**

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name and capacity)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name and capacity)

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\*Pursuant to [31 MRSA §1676.1.B](#), this amended annual report **MUST** be signed by a person authorized by the limited liability company.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under [17-A MRSA §453](#)

Please remit your payment made payable to the Maine Secretary of State.

Submit completed form to:

**Secretary of State**  
**Division of Corporations, UCC and Commissions**  
**101 State House Station**  
**Augusta, ME 04333-0101**  
Telephone Inquiries: (207) 624-7752

Email Inquiries: [CEC.Corporations@Maine.gov](mailto:CEC.Corporations@Maine.gov)

## Filer Contact Cover Letter

To: Department of the Secretary of State  
Division of Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101

Tel. (207) 624-7752

Name of Entity (s):

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List type of filing(s) enclosed (i.e. Articles of Incorporation, Articles of Merger, Articles of Amendment, Certificate of Correction, etc.) Attach additional pages as needed.

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Special handling request(s): (check all that apply)

- ☐ Hold for pick up  
☐ Expedited filing - 24 hour service (\$50 additional filing fee per entity, per service)  
☐ Expedited filing - Immediate service (\$100 additional filing fee per entity, per service)

Total filing fee(s) enclosed: \$ \_\_\_\_\_

**Contact Information – questions regarding the above filing(s), please call or email:** (failure to provide a contact name and telephone number or email address will result in the return of the erroneous filing (s) by the Secretary of State's office)

\_\_\_\_\_  
(Name of contact person)

\_\_\_\_\_  
(Daytime telephone number)

\_\_\_\_\_  
(Email address)

The enclosed filing(s) and fee(s) are submitted for filing. Please return the attested copy to the following address:

\_\_\_\_\_  
(Name of attested recipient)

\_\_\_\_\_  
(Firm or Company)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State & Zip)